PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mai							
	()		or <u>Fax</u>	(571) 273-2885			
INSTRUCTIONS: This for appropriate. All further corrindicated unless corrected b maintenance fee notifications	hould be used for the espendence including the elow be directed out of the elow is a second of the elow is a second out of the elow is a secon	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBI ders and notificati a) specifying a new	LICATION FEE (if requestion of maintenance fees correspondence address	uired). Blocks 1 through 5 sl will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE 22919 759	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
SHINJYU GLOBAL IP COUNSELORS, LLP 1233 20TH STREET, NW, SUITE 700 WASHINGTON, DC 20036-2680				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
1						(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/712,256	11/14/2003	4/2003 Tsutomu Mu		oka	SN-US035146	8057	
TITLE OF INVENTION: BI	CYCLE PEDAL ASSEMB	LY					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400)	\$300	\$1700	03/13/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
KIM, CHONG HWA 360				074-594600			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Shinjyu Global IP Counselors, LLP 2 2 3 3				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless		low, no assignee	data will appear or	n the patent. If an assig	nee is identified below, the de	ocument has been filed for	
(A) NAME OF ASSIGNEE (B) RES				RESIDENCE: (CITY and STATE OR COUNTRY)			
', Shimano Inc.			Osaka, Japan				
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fce(s) are enclosed: 4b. Payment of Fee(s):							
Issue Fee		A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 invatoration (TADDO2) 00000029 10712256					
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S. Change in Entity Status (from status indicated above)							
***	MALL ENTITY status. See				ALL ENTITY status. See 37 Cl		
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Authorized Signature / Le 7				Date	1-3-06	d Mile	
Typed or printed name		Registration No. 32,383					
submitting the completed app this form and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1	plication form to the USPT for reducing this burden, st nia 22313-1450. DO NOT 1450.	O. Time will vary hould be sent to the SEND FEES OR (depending upon the Chief Information COMPLETED FOR	le individual case. Any c n Officer, U.S. Patent and MS TO THIS ADDRES	the public which is to file (and minutes to complete, includin omments on the amount of tir I Trademark Office, U.S. Depa S. SEND TO: Commissioner displays a valid OMB control	ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	